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CONFIRMATION NO. 6190

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/581,538	04/12/2007	514	1623	705711		
APPLICANTS Shawn DeFrees, North Wales, PA; Robert J. Bayer, San Diego, CA; Caryn Bowe, Doylestown, PA;						
** CONTINUING DATA ***** This application is a 371 of PCT/US04/40709 12/03/2004 which claims benefit of 60/527,082 12/03/2003 and claims benefit of 60/539,387 01/26/2004 and claims benefit of 60/592,744 07/29/2004 and claims benefit of 60/614,518 09/29/2004 and claims benefit of 60/623,387 10/29/2004						
** FOREIGN APPLICATIONS *****						
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 09/21/2007						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SCARLETT Y GOON/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY PA	SHEETS DRAWINGS 22	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 2
ADDRESS LEYDIG VOIT & MAYER, LTD TWO PRUDENTIAL PLAZA, SUITE 4900 180 NORTH STETSON AVENUE CHICAGO, IL 60601-6731 UNITED STATES						
TITLE Glycopegylated Follicle Stimulating Hormone						
FILING FEE RECEIVED 290	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			